

# **APPLICATION INSTRUCTIONS FOR MISSOURI'S LOW INCOME HOME ENERGY ASSISTANCE PROGRAM**

**Please read the instructions carefully. Answer every question and turn in the required documents or your application could be delayed or denied.**

**You should continue to pay your utility bill in order to avoid being disconnected or running out of bulk fuel such as propane, wood or pre-paid electric. Once your application has been processed you will receive a letter informing you if you are eligible for LIHEAP and if so, the benefit amount and name of your supplier.**

**ATTENTION APPLICANT: When making any required utility payments, pay only your utility provider. Agencies will not accept fees or utility payments under any circumstances.**

Applications will be accepted beginning October 1 if any member of your household is age 60 and over or if any household member is disabled. Verification may be necessary. Any household not meeting these criteria may apply beginning November 1.

Use Blue or Black ink.

## **Part 1-Contact Information/Address Corrections**

You must provide your current home address or make any necessary corrections if the home address on the application is not current. Also, if possible, please make sure to list a phone or message number. If we are unable to contact you by phone it may cause processing delays if there are questions concerning your application.

## **Part 2-Household Members**

Completion of this section is required. List everyone living in the household starting with yourself. Complete the information in each box for every household member. If your household exceeds 5 members, please use the additional space provided on the back of the instruction sheet.

## **Part 3-Utility/Household Information**

Complete this section and submit a copy of your most recent fuel statement and/or utility bill for both your primary/main heat source and your secondary/other heat source. If you are in disconnection threat, send a copy of your disconnection notice.

Your primary/main heat source is determined by the type of furnace, wood stove or heaters you use in your home. Example: If you have a natural gas furnace, your primary/main heat source would be natural gas. Electric would be your secondary/other heat source because it is used to run the furnace blower.

If you or someone in the household suffers from a life threatening condition, a medical statement from a qualified doctor or nurse is required. The letter does not have to include a diagnosis or condition, just a statement that a life threatening condition exists.

## **Part 4-Landlord Information**

If your utility bill is in the landlord's name and/or you do not pay the utility company directly, complete this section.

## **Part 5-Earned Income & Allowable Deductions**

Complete this section if anyone in the household has income from a job or self-employment. All income received from tips, payments for services, and wages should be reported for all jobs held; including when a household member has worked more than one job.

Provide documentation of all gross income received last month. Gross income is income received *before* taxes are withheld. (Example: If you are applying in the month of February, submit copies of all paystubs with pay dates in January.) Also, court ordered Child Support that is paid outside the household can be deducted. In order to receive this deduction, supply your 8-digit Child Support case number.

## **Part 6- Unearned Income**

Complete this section if anyone in the household receives unearned income. This is income that does not come from a job or business. Provide documentation for all unearned income received last month.

## **Part 7- Resources**

Declare all of your resources (assets). Please list the amounts of money you have in each type of account.

## **Part 8-Fair Hearing Notification**

This section is for informational purposes only and does not require completion on the LIHEAP Application.

**Part 9-Consent for Processing**

Read the Consent for Processing and sign in ink. **Failure to sign and date the application in ink will prevent your LIHEAP application from being processed.**

**Part 2- HOUSEHOLD MEMBERS**

**If your household exceeds 5 members, please complete this section and list the additional members here.**

ADDITIONAL HOUSEHOLD MEMBERS FOR: \_\_\_\_\_  
(Applicant Name) (Applicant SSN)

Name	Food Stamp Recipient Yes/No	Social Security Number	Birth Date	Relationship	Sex M/F	Race	US Citizen Yes/No

**Items needed to avoid processing delays - (Always send copies; Do not send originals):**

- Completed application that is signed and dated.
- Copies of Social Security cards for everyone in the household. *Household members receiving assistance from the Family Support Division or who received LIHEAP in previous years may not need to provide this proof unless a change has occurred.*
- Copies of utility and/or fuel bills including any disconnection notices.
- Proof of all earned & unearned income from last month for all household members that receive it. *Household members who are active food stamp recipients do not need to provide proof of these incomes.*

# WHERE TO MAIL YOUR LIHEAP APPLICATION

*Search for your local office by referring to the county in which you live.*

## **Audrain, Boone, Callaway, Cole, Cooper, Howard, Moniteau, Osage**

Central Missouri Community Action (CMCA)  
800 N Providence Rd Ste 103  
Columbia, MO 65203-4300  
Phone number: (573) 443-1100

## **St. Louis County**

Community Action Agency of St. Louis County (CAASTLC)  
2709 Woodson Rd  
Overland, MO 63114-4817  
Phone number: (314) 863-0015

## **Andrew, Buchanan, Clinton, DeKalb**

Community Action Partnership of Greater St. Joseph (CAPSTJOE)  
817 Monterey  
St. Joseph, MO 64503-3611  
Phone number: (816) 233-8281

## **Atchison, Gentry, Holt, Nodaway, Worth**

Community Services, Inc. of Northwest Missouri (CSI)  
PO Box 328  
Maryville, MO 64468-0328  
Phone number: (660) 582-3113

## **Barton, Jasper, Newton, McDonald**

Economic Security Corporation of Southwest Area (ESC)  
PO Box 207  
Joplin, MO 64802-0207  
Phone number: (417) 781-0352

## **Bollinger, Cape Girardeau, Iron, Madison, Perry, St. Francois, Ste. Genevieve, Washington**

East Missouri Action Agency (EMAA)  
PO Box 308  
Park Hills, MO 63601-0308  
Phone number: (573) 431-5191

## **Dunklin, Mississippi, New Madrid, Pemiscot, Scott, Stoddard**

Delta Area Economic Opportunity Corporation (DAEOC)  
99 Skyview Rd  
Portageville, MO 63873-9180  
Phone number: (573) 379-3851

## **Caldwell, Daviess, Grundy, Harrison, Linn, Livingston, Mercer, Putnam, Sullivan**

Green Hills Community Action Agency (GHCAA)  
1506 Oklahoma Ave  
Trenton, MO 64683-2587  
Phone number: (660) 359-3907

## **City of St. Louis, Wellston**

Urban League (ULSTL)  
3701 Grandel Square  
St. Louis, MO 63108-3627  
Phone number: (314) 615-3640

## **Jefferson, Franklin**

Jefferson-Franklin Community Action Agency (JFCAC)  
PO Box 920  
Hillsboro, MO 63050-0920  
Phone number: (636) 789-2686

## **Camden, Crawford, Gasconade, Laclede, Maries, Miller, Phelps, Pulaski**

Missouri Ozarks Community Action, Inc. (MOCA)  
PO Box 69  
Richland, MO 65556-0069  
Phone number: (573) 765-3263

## **Carroll, Chariton, Johnson, Lafayette, Pettis, Ray, Saline**

Missouri Valley Community Action Agency (MVCAA)  
16 S Folger St  
Carrollton, MO 64633-1253  
Phone number: (660) 542-0418

## **Lewis, Lincoln, Macon, Marion, Monroe, Montgomery, Pike, Ralls, Randolph, Shelby, St. Charles, Warren**

North East Community Action Corporation (NECAC)  
805 N Business Highway 61  
Bowling Green, MO 63334-1351  
Phone number: (573) 324-0120

## **Adair, Clark, Knox, Schuyler, Scotland**

Northeast Missouri Community Action Agency (NMCAA)  
PO Box 966  
Kirksville, MO 63501-0966  
Phone number: (800) 737-3165

## **Douglas, Howell, Oregon, Ozark, Texas, Wright**

Ozark Action, Inc. (OAI)  
710 E Main St  
West Plains, MO 65775-3307  
Phone number: (417) 256-6147

## **Barry, Christian, Dade, Dallas, Greene, Lawrence, Polk, Stone, Taney, Webster**

Ozarks Area Community Action Corporation (OACAC)  
215 S Barnes Ave  
Springfield, MO 65802-2204  
Phone number: (417) 864-3460

## **Butler, Carter, Dent, Reynolds, Ripley, Shannon, Wayne**

South Central Missouri Community Action Agency (SCMCAA)  
PO Box 6  
Winona, MO 65588-0006  
Phone number: (573) 325-4255

## **Jackson, Clay, Platte**

United Services Community Action Agency (USCAA)  
6323 Manchester Ave  
Kansas City, MO 64133-4717  
Phone number: (816) 358-6868

## **Bates, Benton, Cass, Cedar, Henry, Hickory, Morgan, St. Clair, Vernon**

West Central Missouri Community Action Agency (WCMCAA)  
106 W 4<sup>th</sup> Street  
Appleton City, MO 64724-1402  
Phone number (660) 476-2185